

2015 RENEWAL PORTFOLIO | CALIFORNIA

Changes to 2015 benefits



The following provides information about benefit changes we're planning to make to our Northern and Southern California regions' 2015 Kaiser Foundation Health Plan (KFHP) *Group Agreements*, including *Evidence of Coverage* documents, and Kaiser Permanente Insurance Company (KPIC) *Group Policies*, including *Certificates of Insurance (COI)* documents. Unless otherwise noted, these changes are effective as contracts renew starting January 1, 2015.

These changes may be subject to regulatory approval. This document does not include all changes that may be made for 2015. A summary of the most important changes and clarifications will be included in your 2015 renewal notice for KFHP coverage, and in your *Summary of Benefit Changes for 2015* for KPIC coverage.*



Refer to your Summary of Benefit Changes for more detail

Accumulation of services to the out-of-pocket maximum

Beginning with the 2014 plan year, the Affordable Care Act requires nongrandfathered large group plans to accumulate plan services that are considered essential health benefits to the out-of-pocket (OOP) maximum. Kaiser Permanente delayed the accumulation of pharmacy services to the OOP maximum for one year under the transitional relief afforded to group health plans. Starting in 2015, outpatient drugs provided by Kaiser Permanente pharmacy services will accumulate to the Kaiser Permanente medical OOP maximum for nongrandfathered large group plans as contracts renew.

For services provided to your group by an outside vendor, Kaiser Permanente won't accumulate cost shares to the Kaiser Permanente medical plan OOP maximum. Services provided to your group by an outside vendor can have separate OOP maximums as long as the combined amount doesn't exceed the 2015 annual limitation of \$6,600 per individual and \$13,200 per family as defined by the U.S. Department of Health and Human Services. For example, medical services administered by Kaiser Permanente and pharmacy services administered by an outside vendor can accrue separately provided that the

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combined OOP maximum amounts for the year don't exceed the annual limitation.

Kaiser Permanente will be using a new process for tracking accumulation toward the OOP maximum for HMO plan members. This will make it easier for members to determine how close they are to their OOP maximum. It could also result in members getting bills after visits if they receive additional services requiring a cost share that wasn't collected during the check-in process.

Please note that we'll continue to accumulate cost shares toward the OOP maximum (and deductible, if applicable) on a calendar-year basis unless your group requests a different accumulation period.[†]

Reducing the risk of breast cancer

In 2013, the United States Preventive Services Task Force (USPSTF) updated its recommendations for medications that reduce the risk of breast cancer in asymptomatic women over 35. Beginning October 1, 2014, women in nongrandfathered plans who are at increased risk for breast cancer will have no cost share for certain preventive anti-cancer medications when those medications are prescribed by a plan provider.

Preventive screenings for lung cancer

The USPSTF also recommended in 2013 that older adults with a significant recent history of smoking receive annual screenings for signs of lung cancer. As of January 1, 2015, CT scans of the thorax to screen for lung cancer will fall under preventive care. The screenings will be provided at no cost share for members in nongrandfathered plans.

*The traditional HMO, deductible HMO, and the HMO portion (first tier) of the POS plan are underwritten by Kaiser Foundation Health Plan, Inc. (KFHP). Kaiser Permanente Insurance Company (KPIC) underwrites the PPO, the out-of-area indemnity plan, and in-network and out-of-network portions (second and third tiers) of the POS plan. KPIC is a subsidiary of KFHP.

[†] Confirm pricing with your Kaiser Permanente Account Management representative.
Information may have changed since publication.